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33g, if Trainsportation Injury, Specify:		1.	fnıλ Occuraqt	331. Describe How in	0708
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CN DACE DA	y or Town, State)	nber or Rural Route Number, Cit	nuk bing teette) yu	33e. Location of Inju	
	hjury (e.g., Decedent's home, construction	מי נושה פו חקנוץ בפני דומכם פו	cc (mandeding	23a. Date of Injury (A	
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Yes Aldo Cause of Death?		an stren		- III GOOD GO OF	
29a. Was An Autopsy 29b. Wote Autopsy Findings Performed? Available Prior To Completion Of	4011				CAU
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			1 1	arti vrutni to essosi(i)	4TA
4	7,1	Consequence of)		cause. Enter Underlying Car	
<u> </u>		Consequence of)		Sequentially list conditions, if any, isading to immediate	i.
E CANDET BRUMINE	SAB 210 YAZI	SA KARLOS	000	inmediate Ceuse (Final disease or condito reculting in deals)	
ry sereal, choos, or heart letture. List Between Oraset and Dead Between Oraset and Dead	בון פעקפו. הוא נונסקס כון קאָנאל" פויונאן ווז מאנקונים כו ומילוקיפון בין פעקפו. הוא נונסקס כון קאָנאל" פויונאן ווז מאנקונים כו ומילוקיפון	mplications had counsed the death. Do no se or pu'nd in permanent blue or black but	disease, liquifes, or co. couse on each line. Ty		
229	PARK DR DOVER, OH 44	IOND' 300 MEDICAL	SEPH EDM	BRYAN, JC	
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er 28g. Date Signod	Sef. License numb	87 7000		26e, Signeture and	SE
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Sections Burial Firming by	1062			GEIST, SU	REC
4106 81 2012)	25b. District No.	Z#777	A tahud galbasi nos	. 25a, Name of Pen	NOILISOASIO NVALSBER
	24. Data Filed	7.10	ameut	23. Registrar's Sig	<u> </u>
NEW PHILADELPHIA, OH 44663	DOVER, OH 223d. Location (CityTown and State)		s Valley Cre		ISP
an Te and all	August 18, 2014	nelery, Crematory, or other place)		nonsmalo	IIISC
LINN-HERT-GEIB FUNERAL HOME	22b. Date of Disposition		Lionisod	22a, Method of Dis	N F
21. Name and Complete Address of Funeral Facility	20. Ucerse Number (of licensee) 008760	200 OL OTHOLYSCO!	ECON COLOS ELIEN	19, Signatura of Eu	LION NOITH
TUSCARAWAS	PHILADELPHIA, OH 44663	NEM	ZN 199.0	9.01111 679	g
1 led. County of Death	or Town, State and Zip Code	ve street & number) 180, City	(W not brailingon, gi	Decedent's	
NEW PHILADELPHIA, OHIO 44663			ч	1880 to sosiff .e8f	
17.c. Mailling Address (Street and Murrhes, Cay, State, Zap Cox 875 Third Street SE	17b. Relationship to Decedent Wife			CAROL W	8658
NOSTI	16. Mother's Marine (prior to first in			10HN CIL	19
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wie, give name prior to first marriage)		rised to emit is suisis left Deit	Mar	Yes in US Arme	
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· uwo	Bc. City or T	8b. County		8a. Rosidence Sta	DECEDENT
MURRAY CITY, OHIO	Memins February 25, 1940	5b. Under 1 Yes: 5c. Under 1 Yes: 5c. Under 1 Yes: Months Hours	68. Age (76813) (76813)		
Male Mugust Country)			2.1	4. Social Security	574
2. Sex 3. Date of Dooth (MorDayNeer) ALOS, 21 13uguA Aloguet 15, 2014	×	"s if any)(First Meddie, LAST, suffi	LSON 1 Name(Include No	GLEN R W	
	print in permanent blue or black ink	50800041G	C-1062 ONS	Registrar	*
Sate File No. 2014070869	VITAL STATICS HTA3 OF DEATH	L	eg. Dist. No. 790	Right A	
			.0N , 79	Reg. Dist.	